

(Government Code Sections 84200 - 84216.5)

JUL 24 2006

CALIFORNIA FORM 460Page 1 of 12

COPY

from 01/01/2006

through 06/30/2006

Date of Election **REGISTRATION**

(Month, Day, Year) By ME

06/03/2008

BOARD OF VOTERS

REGISTRAR OF VOTERS

☒ Officeholder, Candidate Controlled Committee ☐ Ballot Measure Committee

☐ State Candidate Election Committee ☐ Primarily Formed

☐ Recall ☐ Controlled

☐ Sponsored

☐ General Purpose Committee

☐ Sponsored

☐ Small Contributor Committee

☐ Political Party/Central Committee

☐ Primarily Formed Candidate Officeholder Committee

☐ Pre-election Statement
☒ Semi-annual Statement
☐ Termination Statement
☐ Amendment (Explain below)

☐ Quarterly Statement
☐ Special Odd-Year Report
☐ Supplemental Pre-election Statement - Attach Form 495

I.D. NUMBER
1243639

COMMITTEE NAME

Bill Campbell for Supervisor

STREET ADDRESS (AIO DO NOT)

CITY

STATE

ZIP CODE

AREA CODE/PHONE

STREET ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY

STATE

ZIP CODE

AREA CODE/PHONE

OPTIONAL: FAX/E-MAIL ADDRESS

()

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on

7-7-06

DATE _____

Executed on

DATE 7/19/06

DATE:

Executed on

DATE _____

Executed on

DATE _____

By

By

By

By

SIGNATURE OF TREASURER OR ASSISTANT TREASURER

SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT OR RESPONSIBLE OFFICER OF SPONSOR

SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

Recipient Committee
Campaign Statement
Cover Page - Part 2

COVER PAGE - PART 2

CALIFORNIA
FORM **460**

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5. Officeholder or Candidate Controlled Committee **6. Ballot Measure Committee**

NAME OF OFFICEHOLDER OF CANDIDATE

Bill Campbell

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

County Supervisor, District 3, Orange County

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP CODE

Related Committees Not Included in this Statement: List any committees not included in this consolidated statement that are controlled by you or which are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

COMMITTEE NAME

I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME

I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER

JURISDICTION

☐ SUPPORT

☐ OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE OR, PROPONENT

OFFICE SOUGHT OR HELD

DISTRICT NO. IF ANY

7. Primarily Formed Committee

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

Campaign Disclosure Statement Summary Page

SUMMARY PAGE

| | |
|--|--|
| Statement covers period from <u>01/01/2006</u> through <u>06/30/2006</u> | CALIFORNIA FORM 460 Page <u>3</u> of <u>12</u> I.D. NUMBER 1243639 |
|--|--|

NAME OF FILER Bill Campbell, Bill Campbell for Supervisor

Contributions Received

| | Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) | Column B CALENDAR YEAR TOTAL TO DATE |
|---|--|--|
| 1. Monetary Contributions <i>Schedule A, Line 3</i> | \$ <u>0.00</u> | \$ <u>0.00</u> |
| 2. Loans Received <i>Schedule B, Line 7</i> | <u>0.00</u> | <u>0.00</u> |
| 3. SUBTOTAL CASH CONTRIBUTIONS <i>Add Lines 1 + 2</i> | \$ <u>0.00</u> | \$ <u>0.00</u> |
| 4. Non-monetary Contributions <i>Schedule C, Line 3</i> | <u>0.00</u> | <u>0.00</u> |
| 5. TOTAL CONTRIBUTIONS RECEIVED <i>Add Lines 3 + 4</i> | \$ <u>0.00</u> | \$ <u>0.00</u> |

Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

| | 1/1 through 6/30 | 7/1 to Date |
|---------------------------------|------------------|-------------|
| 20. Contributions Received | \$ <u>0</u> | <u>0</u> |
| 21. Expenditures Made | \$ <u>0</u> | <u>0</u> |

Expenditures Made

| | | |
|--|---------------------|---------------------|
| 6. Cash Payments <i>Schedule E, Line 4</i> | \$ <u>15,080.92</u> | \$ <u>15,080.92</u> |
| 7. Loans Made <i>Schedule H, Line 7</i> | <u>0.00</u> | <u>0.00</u> |
| 8. SUBTOTAL CASH PAYMENTS <i>Add Lines 6 + 7</i> | \$ <u>15,080.92</u> | \$ <u>15,080.92</u> |
| 9. Accrued Expenses (Unpaid Bills) <i>Schedule F, Line 3</i> | <u>0.00</u> | <u>0.00</u> |
| 10. Nonmonetary Adjustment <i>Schedule C, Line 3</i> | <u>0.00</u> | <u>0.00</u> |
| 11. TOTAL EXPENDITURES MADE <i>Add Lines 8 + 9 + 10</i> | \$ <u>15,080.92</u> | \$ <u>15,080.92</u> |

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditure Made* (If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy) Total to Date

Current Cash Statement

| | |
|--|---------------------|
| 12. Beginning Cash Balance <i>Previous Summary Page, Line 16</i> | \$ <u>25,980.26</u> |
| 13. Cash Receipts <i>Column A, Line 3 above</i> | <u>0.00</u> |
| 14. Miscellaneous Increases to Cash <i>Schedule I, Line 4</i> | <u>0.00</u> |
| 15. Cash Payments <i>Column A, Line 8 above</i> | <u>15,080.92</u> |
| 16. ENDING CASH BALANCE <i>Add Lines 12 + 13 + 14, then subtract Line 15</i> | \$ <u>10,899.34</u> |

If this is a Termination Statement, Line 16 must be zero.

17. LOAN GUARANTEES RECEIVED *Schedule B, Part 1, Column (b)* \$ 0.00

Cash Equivalents and Outstanding Debts

| | |
|--|----------------|
| 18. Cash Equivalents | \$ <u>0.00</u> |
| 19. Outstanding Debts <i>Add Line 2 + Line 9 in Column C above</i> | \$ <u>0.00</u> |

Schedule D
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees

SCHEDULE D

Statement covers period
 from 01/01/2006
 through 06/30/2006

CALIFORNIA
FORM **460**

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NAME OF FILER Bill Campbell, Bill Campbell for Supervisor

I.D. NUMBER

1243639

| DATE | NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE | TYPE OF PAYMENT | DESCRIPTION (IF REQUIRED) | AMOUNT THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|--------------------|---|--|------------------------------|-----------------------|---|--|
| 06/13/2006 | Curt Pringle Mayor | <input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure | | 500.00 | 500.00 | 500.00 (P08) |
| | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | | | | | |
| 03/15/2006 | Republican Party of Orange County | <input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure | | 2,500.00 | 2,650.00 | 12,650.00 (P08) |
| | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | | | | | |
| 03/15/2006 | Republican Party of Orange County | <input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure | | 150.00 | 2,650.00 | 12,650.00 (P08) |
| | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | | | | | |
| SUBTOTAL \$ | | | | 3,150.00 | | |

Schedule D Summary

- Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.) \$ 3,150.00
- Contribution and independent expenditures made this period of under \$100 \$ 99.00
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) **TOTAL \$** 3,249.00

Schedule E
Payments Made

SCHEDULE E

| | | |
|--|---------------------------|-------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from <u>01/01/2006</u> | through <u>06/30/2006</u> | |
| NAME OF FILER <u>Bill Campbell, Bill Campbell for Supervisor</u> | | Page <u>5</u> of <u>12</u> |
| | | I.D. NUMBER <u>1243639</u> |

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

| | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
| CNS campaign consultants | MTG meetings and appearances | RFD returned contributions |
| CTB contribution (explain nonmonetary)* | OFC office expenses | SAL campaign workers salaries |
| CVC civic donations | PET petition circulating | TEL t.v. or cable airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging and meals (explain) |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging and meals (explain) |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, e-mail) |

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|------------------------|-------------|
| American Express | OFC | | 469.56 |
| Bill Campbell | OFC | | 768.01 |
| Boys & Girls Clubs of Tustin | CVC | | 200.00 |

SUBTOTAL \$ 1,437.57

Schedule E Summary

| | |
|--|---------------------------|
| 1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.) | \$ 14,728.94 |
| 2. Unitemized payments made this period of under \$100. | \$ 351.98 |
| 3. Total interest paid this period on outstanding loans. (Enter amount from Schedule B, Part 2, Column(d).) | \$ 0.00 |
| 4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) | TOTAL \$ 15,080.92 |

**Schedule E
(Continuation Sheet)
Payments Made**

SCHEDULE E (CONT.)

| | | |
|--------------------------------|---------------------------|-------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from <u>01/01/2006</u> | through <u>06/30/2006</u> | |
| Page <u>6</u> of <u>12</u> | | I.D. NUMBER <u>1243639</u> |

NAME OF FILER Bill Campbell, Bill Campbell for Supervisor

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

| | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
| CNS campaign consultants | MTG meetings and appearances | RFD returned contributions |
| CTB contribution (explain nonmonetary)* | OFC office expenses | SAL campaign workers salaries |
| CVC civic donations | PET petition circulating | TEL t.v. or cable airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging and meals (explain) |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging and meals (explain) |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, e-mail) |

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|----|------------------------|-----------------|
| | CODE | OR | | |
| C.W.L.A. | CVC | | | 250.00 |
| College Republicans at UCI | CVC | | | 5,000.00 |
| Christine Compton | OFC | | | 238.15 |
| Curt Pringle for Mayor 2006 | CTB | | | 500.00 |
| ID# 1254696 | | | | |
| SUBTOTAL \$ | | | | 5,988.15 |

Schedule E
(Continuation Sheet)
Payments Made

SCHEDULE E (CONT.)

| | | |
|--------------------------------|---------------------------|-------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from <u>01/01/2006</u> | through <u>06/30/2006</u> | |
| Page <u>7</u> of <u>12</u> | | I.D. NUMBER <u>1243639</u> |

NAME OF FILER Bill Campbell, Bill Campbell for Supervisor

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| | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
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| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging and meals (explain) |
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| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|----|------------------------|-----------------|
| | CODE | OR | | |
| E.J.B. Inc. | OFC | | | 381.22 |
| Barrett Garcia | PRO | | | 1,004.00 |
| IVC Foundation | FND | | | 250.00 |
| MADD | PRT | | | 500.00 |
| SUBTOTAL \$ | | | | 2,135.22 |

Schedule E
(Continuation Sheet)
Payments Made

SCHEDULE E (CONT.)

| | | |
|---|------------|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/01/2006 | |
| through | 06/30/2006 | Page 8 of 12 |
| NAME OF FILER Bill Campbell, Bill Campbell for Supervisor | | I.D. NUMBER 1243639 |

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

| | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
| CNS campaign consultants | MTG meetings and appearances | RFD returned contributions |
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| CVC civic donations | PET petition circulating | TEL t.v. or cable airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging and meals (explain) |
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| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|----|------------------------|-------------|
| | CODE | OR | | |
| McPherson Education Foundation | CVC | | | 250.00 |
| Orange Park Association | CVC | | | 250.00 |
| Orange Republican Women. Federated | PRT | | | 110.00 |
| Republican Party of Orange County | CTB | | | 2,650.00 |
| ID# 742088 | | | | |
| SUBTOTAL \$ | | | | 3,260.00 |

Schedule E
(Continuation Sheet)
Payments Made

SCHEDULE E (CONT.)

| | | |
|---|------------|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/01/2006 | |
| through | 06/30/2006 | Page 9 of 12 |
| NAME OF FILER Bill Campbell, Bill Campbell for Supervisor | | I.D. NUMBER 1243639 |

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

| | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
| CNS campaign consultants | MTG meetings and appearances | RFD returned contributions |
| CTB contribution (explain nonmonetary)* | OFC office expenses | SAL campaign workers salaries |
| CVC civic donations | PET petition circulating | TEL t.v. or cable airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging and meals (explain) |
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| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, e-mail) |

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|----|------------------------|-------------|
| | CODE | OR | | |
| SLDC 50th Anniversary Gala Tribute Book | PRT | | | 750.00 |
| Tustin Area Republican Women Federated | MTG | | | 500.00 |
| Tustin Chamber of Commerce | OFC | | | 158.00 |
| Tustin Public Schools Foundation | CVC | | | 500.00 |

SUBTOTAL \$ 1,908.00

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of an Officeholder or Candidate)

SCHEDULE G

| | | |
|---|------------|----------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 01/01/2006 | |
| through | 06/30/2006 | Page 10 of 12 |
| NAME OF FILER Bill Campbell, Bill Campbell for Supervisor | | I.D. NUMBER 1243639 |

NAME OF AGENT OR INDEPENDENT CONTRACTOR:

American Express

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

| | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
| CNS campaign consultants | MTG meetings and appearances | RFD returned contributions |
| CTB contribution (explain nonmonetary)* | OFC office expenses | SAL campaign workers salaries |
| CVC civic donations | PET petition circulating | TEL t.v. or cable airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging and meals (explain) |
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| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, e-mail) |

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| U.S. Postmaster | POS | | | 33.00 |
| Ambroisa | OFC | | | 509.78 |
| | | | | |
| | | | | |
| | | | | |
| SUBTOTAL \$ | | | | 542.78 |

Schedule G
Payments Made by an Agent or Independent Contractor (on Behalf of an Officeholder or Candidate)

SCHEDULE G

| | | |
|--------------------------------|---------------------------|-------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from <u>01/01/2006</u> | through <u>06/30/2006</u> | |
| Page <u>11</u> of <u>12</u> | | I.D. NUMBER <u>1243639</u> |

NAME OF FILER Bill Campbell, Bill Campbell for Supervisor

NAME OF AGENT OR INDEPENDENT CONTRACTOR:

Bill Campbell

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

| | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
| CNS campaign consultants | MTG meetings and appearances | RFD returned contributions |
| CTB contribution (explain nonmonetary)* | OFC office expenses | SAL campaign workers salaries |
| CVC civic donations | PET petition circulating | TEL t.v. or cable airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging and meals (explain) |
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| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| SBC Pacific Bell Payment Center | OFC | | | 112.22 |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |

SUBTOTAL \$ 112.22

Payments Made by an Agent or Independent Contractor (on Behalf of an Officeholder or Candidate)**CALIFORNIA FORM 460**

through 06/30/2006

I.D. NUMBER

1243639

NAME OF FILER Bill Campbell, Bill Campbell for Supervisor

NAME OF AGENT OR INDEPENDENT CONTRACTOR:

Christine Compton

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

LIT campaign literature and mailings

PRT print ads

WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE OR CREDITOR
(IF COMMITTEE, ALSO ENTER I.D. NUMBER)

DESCRIPTION OF PAYMENT

AMOUNT PAID

Costco

OFC

48.62

SUBTOTAL \$

48.62